

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	213547349						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: <b>Belden Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CORPORATION SERVICE COMPANY</b> <b>Bank of America Center, 16th Floor</b> <b>1111 East Main Street</b></p> <p><b>RICHMOND, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>11/30/2013</b></p> <p>SCC ID NO: <b>F1808569</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>200,000,000</td> </tr> <tr> <td>PREFER</td> <td>2,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	200,000,000	PREFER	2,000,000
CLASS	AUTHORIZED							
COMMON	200,000,000							
PREFER	2,000,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 7733 FORSYTH BOULEVARD SUITE 800</p> <p style="text-align: center;">CITY/ST/ZIP: SAINT LOUIS, MO 63105</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN S STROUP  TITLE: P,CEO  ADDRESS: 7733 FORSYTH BOULEVARD SUITE 800  CITY/ST/ZIP/CO: SAINT LOUIS, MO 63105 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JOHN S STROUP TITLE: P,CEO ADDRESS: 7733 FORSYTH BOULEVARD SUITE 800 CITY/ST/ZIP/CO: SAINT LOUIS, MO 63105	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: HENK DERKSEN  TITLE: VICE PRESIDENT  ADDRESS: 7733 FORSYTH BOULEVARD SUITE 800  CITY/ST/ZIP/CO: SAINT LOUIS, MO 63105 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: HENK DERKSEN TITLE: VICE PRESIDENT ADDRESS: 7733 FORSYTH BOULEVARD SUITE 800 CITY/ST/ZIP/CO: SAINT LOUIS, MO 63105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR			
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN NORMAN  TITLE: VP FINANCE EMEA  ADDRESS: 7733 FORSYTH BLVD., STE 800  CITY/ST/ZIP/CO: ST. LOUIS, MO 63105 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JOHN NORMAN TITLE: VP FINANCE EMEA ADDRESS: 7733 FORSYTH BLVD., STE 800 CITY/ST/ZIP/CO: ST. LOUIS, MO 63105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR			
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MICHELLE LONG  TITLE: ASST TREASURER  ADDRESS: 7733 FORSYTH BLVD., STE 800  CITY/ST/ZIP/CO: ST. LOUIS, MO 63105 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: MICHELLE LONG TITLE: ASST TREASURER ADDRESS: 7733 FORSYTH BLVD., STE 800 CITY/ST/ZIP/CO: ST. LOUIS, MO 63105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR			
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: HENK DERKSEN  TITLE: CFO  ADDRESS: 7733 FORSYTH BLVD., STE 800  CITY/ST/ZIP/CO: ST. LOUIS, MO 63105 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: HENK DERKSEN TITLE: CFO ADDRESS: 7733 FORSYTH BLVD., STE 800 CITY/ST/ZIP/CO: ST. LOUIS, MO 63105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR			
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NAME:	STEVE BIEGACKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP SALES & MKG		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	KEVIN L BLOOMFIELD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	7733 FORSYTH BOULEVARD SUITE 800		
CITY/ST/ZIP/CO:	SAINT LOUIS, MO 63105		
NAME:	CHRISTOPH GUSENLEITNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP EMEA OPS		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	DENIS SUGGS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP AMERICA OPS		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	DAVID ALDRICH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7733 FORSYTH BOULEVARD SUITE 800		
CITY/ST/ZIP/CO:	SAINT LOUIS, MO 63105		
NAME:	LANCE BALK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	JUDY BROWN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	BRYAN CRESSEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	GLENN KALNASY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	GEORGE MINNICH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
NAME:	JOHN MONTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7733 FORSYTH BLVD., STE 800		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			

<u>/s/ KEVIN L BLOOMFIELD</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>KEVIN L BLOOMFIELD, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>10/11/2013</u> DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		